APPLICATION FOR EXCAVATION PERMIT

Permit* ________  Date: _________

The undersigned hereby makes application to Board of Public Works and Safety of the City of Delphi, Carroll County, Indiana, pursuant to the provisions of Ordinance 99-5 of said City, for a permit to excavate as follows:

1. Location: ____________________________________________________________

2. Purpose: ____________________________________________________________

3. Approximate Size: _________________________________________________

4. Owner: ____________________________________________________________

5. Start/Completion Dates: _____________________________________________

The undersigned represents that all provisions of said Ordinance 99-5 shall be complied with to the satisfaction of said Board or its duly authorized agent.

Applicant: ___________________________  Date: _________________________

Witnessed By: _________________________  Date: _________________________

* * * * *

Permit Fee $25.00

Residential Excavation $250.00

Commercial Excavation $500.00

Amount of deposit retained: ___________________________

Actual Excavation Size: ____________________________

Excavation Repair Cost: ____________________________